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RECENTAL X

State of South Dakota

JAN 0 2 2002

Candidate's or Committee's Report of Receipts and Expenditures

Candidates and candidate committees: File in the office where you filed your nominating petition.

PACs, political party, ballot question and other committees: File with Elections Department, Secretary of State's Office,

500 E Capitol Ave, Pierre, SD 57501-5070

See pages 9 & 10 of the Guideline Book for specific instructions on completing this report. Name of Candidate or Committee ARNOLD MI BROWN Complete Mailing Address 1718 Teton PASS Brooking 5 5,5-57006 Name of Person Making Report ARNOVO M BROWN Phone If you are a candidate, what office are you seeking D/3t/7 - SEVA) or If you are a ballot question committee, indicate which measure(s) the committee was involved with during the reporting period and whether the measure was supported or opposed. Type of Report (See pages 4 & 5 of Guideline Book) LEGIS/afive For Reporting Period Ending (See pages 4 & 5 of Guideline Book) /2-3/-0. The following verification must be completed before submitting report. VERIFICATION OF PERSON MAKING REPORT (print name legibly), certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete. Date: 12-28-02 Signature of Committee Treasurer or Chairperson Revised July 2001 Filed this_

SECRETARY OF STATE

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Name of Candidate or Committee ANNOLD M. BROWN

For the reporting period ending 12-31-02

Schedule A - Direct Contributions

This schedule is used for reporting all direct contributions. You must keep a record of all contributors, but for this report you may combine all contributions of \$100 or less from individuals and the same from political parties and enter these sums as unitemized contributions on their respective lines below and on the next page. Any contribution of more than \$100 or aggregate during a calendar year from an individual or political party and all contributions from PAC's must be entered as a separate item (itemized) giving the amount, name, address and place of employment (if applicable) of the contributor. Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space, or you may attach additional sheets of paper.

Name	ons from Individuals Residence Address	Place of Employment (Name of Employer)	
	5704 West 52 mdst		
Brown	510xx Falls 5.D. 57106	BANKFIRST	\$ <i>250</i>
	7	4	\$
· · · · · · · · · · · · · · · · · · ·			\$
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Name of Candidate or Committee ARNOLO M. BROWN For the reporting period ending 12-31-02

Schedule A - Direct Contributions (continued)

Unitemized Contributions from Political Parties:

Itemized Contributions from Political Parties

Party Name	Address	
		\$
	** The force of the	\$
Total of Itemized Contributions fr	om Political Parties:	*\$ -0-

Itemized Contributions from Political Action Committees (PAC's)

	ttical Action Committees (PAC's)	
(All contributions from PAC Name	Address	
Weel Pac-WellMarly	636 Grant one 5.5 ration 13 DES MOINES, Ia. 50309	\$100.
citigroup	90/154h 51 5w 5 wite 300 Washington Dc 20005	\$/00,
AGC Bullingchapter	Brooking 4. Dr 57006	\$100-
BIPAC (Busines & Sulvating)	ROBOX 190 Preside 5.A 57501	\$ 150.
SDREC (Retailor assoc)	Po 150x 638 Fierre 50 5750/	\$150.
avertie Phormasuticale	457 fartland are #/216	\$ 100.
SD Chropractors	323 30 ml and Brookings 4.D. 57006	\$ 100.
SDHealth Care assoc	51004 Wellerware 51004 FALL 68.57104-209	\$ 200.
Quest Corp	31 ref Fell 5 \$. 57194	\$/00,
SDERNA	Singitudes S.A. 57105	\$ 100.
IFA-50	po 18 or 277 previe 6.4.57501	\$200.
ACE	SIDER FALL SID 57118	\$ -50
SDI	222 capital stat/7 Prese 5. 5 5 7501	\$ 100
SDAHO	3708 Brook Place 31 Kx Freb 50. 57/06	\$ 250
PEPAC	100 Rt. 206 N. Peaper NJ. 07977	\$ 100
	1	\$

Total Itemized Contributions from Political Action Committees: *\$ 1900,

Total of All Direct Contributions (Sum of all lines with an *)

Name of Candidate or Committee

For the reporting period ending /2

Schedule B - Fund-Raising Events Proceeds

List on this schedule fund-raising events held to raise money for the candidate and the net proceeds derived from each event. If a contributor gives more than \$100 or their contribution results in their aggregate being more than \$100 in the calendar year, those contributions must be itemized on Schedule A.

Type of Event

Net Proceeds

Schedule C - In Kind Contributions

Report all non-cash contributions of goods or services and the estimated fair market value. If the value exceeds \$100, the name of the contributor, residence address and place of employment must be reported.

Nature of Non-Cash Contribution

Estimated Value

Name of Contributor

Schedule D - Other Income

Use this schedule to report any refunds, interest earned or other income which is not a direct contribution.

Source of Income

Amount

•	•			1		1	0		
•	Name of	Candidate	or Committe	· HA	NOLA	M	131	Lowa	2
	For the	reporting	period endi	ng_ <i> 2</i>	<u>-3/-</u>	02			
			Schedule B	- Fund-Ra	aising Ever	nts Pro	ceeds		
	derived fro	m each event.	d-raising events h If a contributor an \$100 in the cal	gives more	than \$100 or th	neir contri	bution resul	ts in their	Α.
	Type of	Event			Net Proc	eeds			
· ·					• 10			m. ·	-0
							Total:	\$ <u>-0</u>	
			Schedu	e C - In	Kind Contr	ibution		\$ <u>-0</u>	
	Report all exceeds \$1	non-cash cont	Schedulaributions of goods of the contributor	or services	and the estima	ted fair m	S arket value.	If the value	d.
	exceeds \$1	00, the name	ributions of goods	or services , residence a	and the estima	ted fair m	S narket value. ployment mu	If the value ast be reported of Contri	d.
	exceeds \$1	00, the name	ributions of goods of the contributor	or services , residence a	and the estima address and pla	ted fair m	S narket value. ployment mu	ist be reported	d.
	exceeds \$1	00, the name	ributions of goods of the contributor	or services , residence a	and the estima address and pla	ted fair m	S narket value. ployment mu	ist be reported	d.
	exceeds \$1	00, the name	ributions of goods of the contributor	or services , residence a	and the estima address and pla	ted fair m	S narket value. ployment mu	ist be reported	d.
	exceeds \$1	00, the name	ributions of goods of the contributor	or services , residence a	and the estima address and pla	ted fair m	S narket value. ployment mu	ist be reported	d.
	exceeds \$1	00, the name	ributions of goods of the contributor	or services , residence a	and the estima address and pla	ted fair m	S narket value. ployment mu	ist be reported	d.
	exceeds \$1	00, the name	ributions of goods of the contributor	or services , residence a	and the estima address and pla	ted fair m	S narket value. ployment mu	ist be reported	d.
	exceeds \$1	00, the name	ributions of goods of the contributor th Contributi	or services, residence a	and the estima address and pla	ited fair mice of emp	S narket value. lloyment mu Name	ist be reported	d.

Use this schedule to report any refunds, interest earned or other income which is not a direct contribution.

Source of Income

Amount

Total: \$______

Name of Candidate or Committee ARNOCA M. Brown
For the reporting period ending 12-31-02

Schedule E - Expenditures

This schedule is to report all expenditures relating to a candidate's campaign. Line items have been provided for reporting common expenses. All other expenses should be listed. All contributions to candidates and committees must be listed individually.

Contributions Made to Candidates and Committees: Amount Item 488 Advertising Consulting 321.27 Postage Printing Rent Salaries 622.28 Telephone Travel Utilities Other Expenses:

Todging & dealh 4/10-75

Contributions: Judy Clark 25.

Mary Negotal 25.

Rich paltyest 25.

al aber 50

Sief Jayblon 100

Mile Rounds 150

John Hume 100

Callege Republican 60

producy lo-Republican 50

Total Expenditures: \$3096-96

•	For the	Candidate reporting	period en Sched	ule F - De	bts and			-	WN)
	This schedu reporting pe	ile is to report eriod. If a ser	all of the can vice has been	didate's campa contracted but	aign oblig t not bille	ations whice d, estimate	h are unpa the amoun	id at the end t of the obl	d of the igation.	
	Owed To			Purpose				Amount		
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	,	•								

Total Obligations: \$_____

Name of Candidate or Committee Annous M. Brown

For the reporting period ending 13-31-02

Summary Page

This summary sheet will give a brief outline of all campaign finance activity during this reporting period. Please transfer all totals from the schedules previously completed.

	•		
1.	Amount on hand, if any, at beginning	g of reporting period	\$ 961.77
2.	Receipts		
	Schedule A - Direct Contributions	\$ 2/75	
	Schedule B - Fund-Raising Events	\$ -0 -	
	Schedule C - In Kind Contributions	\$ -0 -	- X - 2
	Schedule D - Other Income	\$ -0-	
	Total of all receipts	\$ 2/75	
3.	Total Monetary Receipts (A+B+D)		\$ 2/75.
4.	Candidate's Personal Contribution t	co Own Campaign	\$ 500.
5.	Monetary Loans to Candidate or Comm	mittee During	\$ -0-
6.	Monetary Loans Repaid During Report	ting Period	\$ <u>-0-</u>
7.	Expenditures - Schedule E		\$ 3096.96
8.	Unpaid Obligations - Schedule F	\$ -0-	
9.	Amount on hand at the close of this This should equal lines (1+3+4+5)-	s reporting period. (6+7)	\$ <u>539.81</u>